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PTO/SB/05 (11-00)

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UTILITY **PATENT APPLICATION TRANSMITTAL**

Attorney Docket No. 3918P002XX5 Edwin Dair First Inventor

Title METHOD AND APPARATUS FOR MULTIBOARD FIBER OPTIC

(Only for new nonprovisional applications under 37 CFR 1 53(b))	Express Mail	Label No.	EL8028728	<u> 41US</u>			6.	
APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application	APPLICATION ELEMENTS e MPEP chapter 600 concerning utility patent application contents		DRESS TO:	Assistant Commissioner for Patents Box Patent Application Washington, DC 20231			310	
1. Fee Transmittal Form (e.g., PTO/SB/17) (Submit an original and a duplicate for fee processing)			CD-ROM or CD-R in		table or			
Applicant claims small entity status. See 37 CFR 1.27. Specification [Total Pages] (preferred arrangement set forth below) - Descriptive title of the Invention	90	8. Nucle (if ap	eotide and/or Amino plicable, all necess	Acid Sequence ary) dable Form (CRI ence Listing on:	-)	sion		
 Cross References to Related Applications Statement Regarding Fed sponsored R & D Reference to sequence listing, a table, or a computer program listing appendix 		c.	ii. paper	rifying identity of		opies		
 Background of the Invention 	Γ	ACCOMPANYING APPLICATION PARTS						
 Brief Summary of the Invention Brief Description of the Drawings (if filed) 		9. 🔲	Assignment Papers	s (cover sheet & o	documer	nt(s))		
Detailed Description Claim(s) Abstract of the Disclosure		_	-	R. § 3.73(b) Statement Power of Atto				
- Abstract of the Bibliodalio		11. 🔲	English Translation	Document (if ap	plicable,)		
4. X Drawing(s) (35 U.S.C. 113) [Total Sheets 47]		12. 🔲	Information Disclos Statement (IDS)/P			Copies of IDS Citations		
5. Oath or Declaration [Total Pages 5]		13. 🔲	Preliminary Amend	lment				
 a. Newly executed (original or copy) b. Copy from a prior application (37 C.F.R. § 1.63(d)) 		14. Return Receipt Postcard (MPEP 503) (Should be specifically itemized)						
for continuation/divisional with Box 18	completed)	15. 🔲	Certified Copy of P	•	(s)			
i. DELETION OF INVENTOR(S)		ю. Ц	(if foreign priority is		(0)			
Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1 63(d)(2) and 1 33(b) 6. Application Data Sheet. See 37 CFR 1.76		16. Request and Certification under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent. 17. Other:						
								8. If a CONTINUING APPLICATION, check appropria
Prior application Information: Examiner				Group/Art Unit: _				
For <u>CONTINUATION OR DIVISIONAL APPS only:</u> The entir Box 5b, is considered a part of the disclosure of the accon The incorporation <u>can only</u> be relied upon when a portion	npanving contir	uation or e	divisional application	and is hereby inco	orporate	supplied under d by reference.		
1	8. CORRESP	ONDENC	E ADDRESS					
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Name (Print/Type) William F. Attord		/	Registration	No. (Attorney/A		37,764		
Signature //////	/1/11/			Date	04/	10/01	ノ	

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FEE TRANSMITTAL for FY 2000

Patent fees are subject to annual revision

677.00 (\$) TOTAL AMOUNT OF PAYMENT

Complete if Known					
Application Number					
Filing Date	April 10, 2001				
First Named Inventor	Edwin Dair				
Examiner Name					
Group/Art Unit					
Attorney Docket No.	3918P002XX5				

METHOD OF PAYMENT (check one)			-	FEE	E CALCULATION (continued)				
The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to.		3. ADDITIONAL FEE							
Deposit Account Number 02-2666		ee	Small Fee	Fee		Description		Fee Paid	
Deposit		(\$) 130	Code 205	(\$) 65	Surcharge - late	filina fee or oa	ath		
Account Name Blakely, Sokoloff, Taylor & Zafman LLP		50	227	25	Surcharge - late cover sheet.	provisional fili	ng fee or		
Under 37 CFR §§ 1 16, 1 17, 1 18 and 1 20	139 1 147 2,5	130	139 147 2		Non-English spe For filing a reque		ination		
Applicant claims small entity status See 37 CFR 1 27		920*	112	920*	Requesting publi Examiner action				
2. Payment Enclosed: Check Credit card Money Other	113 1,8	340*	113 1	,840*	Requesting public Examiner action	ication of SIR	after		
Check Credit card Order Other	115 1	110	215		Extension for res	ponse within	first month		
FEE CALCULATION	116 3	390	216	195	Extension for res	ponse within	second month		
1. BASIC FILING FEE	117 8	390	217	445	Extension for res	sponse within	third month		
Large Entity Small Entity	118 1,3	390	218		Extension for res	•			
Fee Fee Fee Fee Description Fee Paid	128 1,8	390	228	945	Extension for res	sponse within	fifth month		
Code (\$) Code (\$) 101 710 201 355 Utility filing fee 355.00	119 3	310	219	155	Notice of Appeal				
101 710 201 355 Utility filing fee 355.00 206 160 Design filing fee		310	220		Filing a brief in s		ppeal		
107 490 207 245 Plant filing fee	ł .	270	221		Request for oral	_		L	
108 710 208 355 Reissue filing fee	138 1,5				Petition to institu				
114 150 214 75 Provisional filing fee		110	240		Petition to revive				
SUBTOTAL (1) (\$) 355.00	141 1,2		241		Petition to revive		aı		
	142 1,2		242 243		Utility issue fee (Design issue fee			-	
2. EXTRA CLAIM FEES Extra Fee from		440 600	244		Plant issue fee	•			
Ctaims below Total Claims 38 - 20* = 18 X 9.00 = \$162.00		130	122		Petitions to the	Commissioner			
Independent 7 - 3**= 4 × 40.00 - \$160.00	123	50	123		Petitions related				
Claims	· ·	180	126		Submission of Ir	•			
**or number previously paid, if greater, For Reissues, see below	581	40	581	40	Recording each	patent assign	ment per		
Large Entity Small Entity					property (times r	number of pro	perties)		
Fee Fee Fee Fee Description Code (\$) Code (\$)	146 7	710	246		Filing a submissi (37 CFR § 1.129		rejection		
103 18 203 9 Claims in excess of 20	149 7	710	249		For each addition				
102 80 202 40 Independent claims in excess of 3	170 -	740	070		examined (37 Cl Request for Con				
104 270 204 135 Multiple Dependent claim, if not paid		710	279 169		Request for expe				
109 80 209 40 **Reissue independent claims over original patent		900		900	of a design appli	cation	~~~.		
110 18 210 9 **Reissue claims in excess of 20 and over original patent	Other fee	e (spe	cify)						
SUBTOTAL (2) (\$) 322.00	*Reduced	l by Basi	ic Filing I	Fee Pa	id St	JBTOTAL (3)	(\$)		
SUBMITTED BY						Compl	ete (if applica	ible)	
Name (Print/Type) William E. Alford		istratio ney/Agei		3	7,764	Telephone	(714) 557		
Signature //// 2 - Klyn/	7					Date	04/10	/01	

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